State of Montana	State of Montana
County of	County of
This instrument was acknowledged before me on	This instrument was acknowledged before me on
Print name of signer(s)	by Print name of signer(s)
Notary Signature Affix seal/stamp as close to signature as possible [Montana notaries must complete the following if not part of stamp]	Notary Signature Affix seal/stamp as close to signature as possible [Montana notaries must complete the following if not part of stamp]
Printed Name Notary Public for the state of Residing at	Printed Name Notary Public for the state of Residing at
My Commission expires:, 20	My Commission expires:, 20
State of Montana County of	State of Montana County of
This instrument was acknowledged before me on	This instrument was acknowledged before me on
by	by
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